

**TRANSMITTAL FORM**Attorney Docket No.
P1913C-2
522C-2In re the application **Alexander B. BEAMAN, et al.**Confirmation No: **4257**Serial No: **10/776,945**Group Art Unit: **2672**Filed: **February 10, 2004**Examiner: **Chung, Daniel J.**For: **Method and Apparatus for Typographic Glyph Construction Including a Glyph Server**

| ENCLOSURES (check all that apply) | | | | | |
|-------------------------------------|-------------------------------------|---|--|-------------------------------------|---|
| <input checked="" type="checkbox"/> | Amendment/Reply | <input type="checkbox"/> | Assignment and Recordation Cover Sheet | <input type="checkbox"/> | After Allowance Communication to Group |
| <input type="checkbox"/> | After Final | <input type="checkbox"/> | Part B-Issue Fee Transmittal | <input type="checkbox"/> | Notice of Appeal |
| <input type="checkbox"/> | Information disclosure statement | <input type="checkbox"/> | Letter to Draftsman | <input type="checkbox"/> | Appeal Brief (in triplicate) |
| <input type="checkbox"/> | Form 1449 | <input type="checkbox"/> | Drawings | <input type="checkbox"/> | Status Letter |
| <input type="checkbox"/> | (X) Copies of References | <input type="checkbox"/> | Petition | <input checked="" type="checkbox"/> | Postcard |
| <input type="checkbox"/> | Extension of Time Request * | <input type="checkbox"/> | Fee Address Indication Form | <input type="checkbox"/> | Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> | Express Abandonment | <input type="checkbox"/> | Terminal Disclaimer | | |
| <input type="checkbox"/> | Certified Copy of Priority Doc | <input type="checkbox"/> | Power of Attorney and Revocation of Prior Powers | | |
| <input type="checkbox"/> | Response to Incomplete Appln | <input checked="" type="checkbox"/> | Change of Correspondence Address | | |
| <input type="checkbox"/> | Response to Missing Parts | *Extension of Term: Pursuant to 37 CFR 1.136, Applicant petitions the Commissioner to extend the time for response for xxxxxx month(s), from to . | | | |
| <input type="checkbox"/> | Executed Declaration by Inventor(s) | | | | |

| CLAIMS | | | | | |
|--------------------|----------------------------------|---|--------------|------------|---------|
| FOR | Claims Remaining After Amendment | Highest # of Claims Previously Paid For | Extra Claims | RATE | FEE |
| Total Claims | 18 | 20 | 0 | \$18.00 | \$ 0.00 |
| Independent Claims | 3 | 3 | 0 | \$88.00 | \$ 0.00 |
| | | | | Total Fees | \$ 0.00 |

| METHOD OF PAYMENT | |
|-------------------------------------|--|
| <input type="checkbox"/> | Check no. _____ in the amount of \$ _____ is enclosed for payment of fees. |
| <input type="checkbox"/> | Charge \$ _____ to Deposit Account No. _____ (Account Holder Name) for payment of fees. |
| <input checked="" type="checkbox"/> | Charge any fees or credit any overpayment to Deposit Account No. <u>02-2120</u> (Sawyer Law Group LLP) |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--|--|
| Attorney Name | Joseph A. Sawyer, Jr., Reg. No. 30,801 |
| Signature | |
| Date | November 10, 2004 |

| CERTIFICATE OF MAILING | |
|---|----------------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on November 10, 2004 | |
| Type or printed name | Irena Nikolova |
| Signature | |